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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

S rial Numb r: N/A

Filing Date:

Applicant: John McKenzie

Title: Watercraft Lift Assembly

Docket Number: 29295.00

Customer Number: 22465

Express Mail Number: EV 416351120 US

PETITION TO MAKE SPECIAL BECAUSE OF APPLICANT'S AGE (37 CFR 1.102(c) and MPEP §708.02 IV)

Commissioner for Patents

Dear Sir:

Applicant hereby petitions to make this application special because applicant is over 65 years of age. No fee is required with this petition in accordance with 37 CFR §1.102(c).

As a showing of Applicant's age, accompanying this petition is a copy of a certificate from the City of Memphis, Tennessee certifying that John McKenzie's date of birth is December 20, 1930.

It is respectfully submitted that the claims of the subject Application are directed toward a single invention. Applicant has made a pre-examination search, and the located references are provided on the Information Disclosure Statement submitted with the Application, which includes discussion of any relevant references.

Pitts & Brittian, P.C. P.O. Box 51295

Knoxville, Tennessee 37950-1295

(865) 584-0105 Voice

(865) 584-0104 Fax

tkulaga@pitts-brittian.com

Respectfully submitted,

Thomas A. Kulaga

Registration No. 46,844

City of Memphis, Tennessee Department of Health

This certifies that a Certificate of Birth for

John Arthur McKenzie
HAS BEEN SUBMITTED TO THIS DEPARTMENT. THE CERTIFICATE IS TO
BE FORWARDED TO THE STATE DEPARTMENT OF HEALTH OF TENNESSEE
AND FILED AS A PERMANENT LEGAL RECORD OF BIRTH.
FATHER'S NAME D. S. McKenzie
Mother's Maiden Name Edna Albright
DATE OF BIRTH Dec. 20, 1930 DATE SUBMITTED Jan. 3, 1931
CERTIFICATE NUMBER 5070 SUPERINTENDENT OF HEALTH
CERTIFICATE NUMBER 5070 C.M. Maraning
SUPERINTENDENT OF HEALTH

The information given on the opposite side of this card relative to the birth of your infant is a copy of a part of the information given on the original certificate of birth filed in this office. If there are errors in this information, please take this up with the Bureau of Vital Statistics, Room 105, Court House. This office will notify your physician and when he makes the necessary changes, a corrected copy will be sent to you.

In the event the full name of the child is not given, you may have the physician submitting the certificate of birth to submit a supplementary certificate of birth provided for by law, setting forth the full name of the child.

If a certified copy of this certificate of birth is desired at any time in the future for legal purposes, you can secure such copy from the State Department of Health, Nashville, Tenn., where the original certificate is permanently filed. Your request for this copy of the certificate should be accompanied by fifty cents, to cover the cost of searching the records and transcribing the data.